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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): NIELSEN et al.	
Serial No.: 10/038,567	Group Art Unit: 2655
Filed: January 3, 2002	Examiner: Vo, Huyen X.
Title: Standardized Inpatient-Outpatient Nomenclatures and Accepting Both Outpatient and Inpatient Date to Commonly Accessible Storage	
Attorney Docket No.: MAMC 00-19A 02	

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SECOND INFORMATION DISCLOSURE STATEMENT

Dear Sir:

This Information Disclosure Statement is submitted:

- ☐ under 37 CFR 1.97(b), or
(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)
- ☒ under 37 CFR 1.97(c) together with either a:
☐ Statement under 37 CFR 1.97(e), or
☒ a \$180.00 fee under 37 CFR 1.17(p), or
(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)
- ☐ under 37 CFR 1.97(d) together with a:
☐ Statement under 37 CFR 1.97(e), and
☐ a \$180.00 fee set forth in 37 CFR 1.17(p).
(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

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Applicant(s) submit herewith Form PTO/1449 Information Disclosure Statement by Applicant(s) with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the

examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

Neither this statement nor the listing of these documents on the accompanying Form PTO/1449 should be considered as an admission by Applicant(s) that these materials are prior art as to Applicant(s). In addition, this statement should not be construed as a representation that no better disclosure exists.

In compliance with the concise explanation requirement under 37 C.F.R. § 1.98(a)(3) for foreign language documents, Applicant encloses herewith an English-language abstract of the Japanese language document.

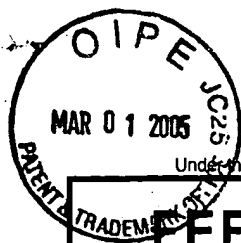
Entry of the Information Disclosure Statement and the accompanying Form PTO/1449 are respectfully solicited.

Respectfully Submitted,

A handwritten signature in cursive script, reading "Kevin M. Barner", is written over a horizontal line.

Kevin M. Barner, Esq.
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Facsimile No.: 202-331-3838

Date: March 1, 2005



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FEE TRANSMITTAL for FY 2005 <small>Effective 10/01/2004. Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	10/038,567
		Filing Date	January 3, 2002
		First Named Inventor	NIELSEN et al.
		Examiner Name	Vo, Huyen X.
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Art Unit	2655
TOTAL AMOUNT OF PAYMENT		Attorney Docket No.	MAMC 00-19A 02
(\$)		180.00	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None					
<input type="checkbox"/> Deposit Account					
Deposit Account Number					
Deposit Account Name					
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<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					
FEE CALCULATION					
1. BASIC FILING FEE		3. ADDITIONAL FEES			
Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	790	2001	395	Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					
Total Claims		Extra Claims		Fee from below	
Independent Claims		-20**=		X 1 =	
Multiple Dependent		-3**=		X =	
				=	
Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple dependent claim, if not paid	
1204	200	2204	100	**Reissue independent claims over original patent	
1205	50	2205	25	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)					
** or number previously paid, if greater; For Reissues, see above					
		Other fee (specify)			
		*Reduced by Basic Filing Fee Paid			
		SUBTOTAL (3)		(\$)	
				180.00	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Kevin M. Barner, Esq.	Registration No. (Attorney/Agent)	46,075
Signature	<i>Kevin M. Barner</i>	Telephone	(202) 331-8777
		Date	3/1/05

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Substitute for form 1449A/PTO

(Use as many sheets as necessary)

Complete if Known

Application Number	10/038,567
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Filing Date	01/03/2002
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First Named Inventor	NIELSEN et al.
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Art Unit	2655
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Examiner Name	Vo, Huyen X.
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Attorney Docket Number	MAMC 00-19A 02
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Sheet

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of

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U.S. PATENT DOCUMENTS

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Sheet

2

of

2

Complete if Known

Application Number

10/038.567

Filing Date

01/03/2002

First Named Inventor

NIELSEN et al.

Art Unit

2655

Examiner Name

Vo, Huyen X.

Attorney Docket Number

MAMC 00-19A 02

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

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